



胃轻瘫和贲门失弛缓症的上消化道

内窥镜检查 (EGD) 准备

Endoscopy (EGD) Prep for Gastroparesis and Achalasia
(Chinese)

什么是胃轻瘫和贲门失弛缓症？ What are gastroparesis and achalasia?

胃轻瘫，也称为**胃淤滞或胃麻痹**，是胃排空其内容物的时间过长的状况。这会减慢食物通过消化系统的蠕动，并可能导致早期的饱腹感、腹胀、恶心、腹痛、体重减轻或胃灼热的症状。Gastroparesis, also called **gastric stasis or gastric paralysis**, is a condition where your stomach takes too long to empty its contents. This slows the movement of food through the digestive system and can cause an early feeling of fullness, bloating, nausea, abdominal pain, weight loss, or heartburn symptoms.

当食道神经受损时就会发生**贲门失弛缓症**，食道最终失去将食物挤压到胃中的能力。这可能会导致食物聚集在食道中。

Achalasia occurs when nerves in the esophagus are damaged, and the esophagus eventually loses the ability to squeeze food down into the stomach. This can cause food to collect in the esophagus.

为了使**内窥镜检查**有效和安全，我们需要确保在做医疗程序前食道或胃中不存在食物及其消化产物。因此，在胃轻瘫或贲门失弛缓症患者中，较长时间的**禁食**（不进食）是必不可少的。

For an **endoscopy** to be effective and safe, we need to make sure that food and its digested products are not present in the esophagus or stomach before the

procedure. Therefore, in patients with gastroparesis or achalasia, a longer period of fasting (not eating) is essential.

程序前的准备 Planning for the procedure

- 检查当日登记报到及离院时您必须有一位年满 18 岁或以上的人作为司机在场陪同。若您登记报到时没有一位司机陪同，我们将需要重新安排您的预约。此人必须在您整个疗程中都留在我们的单位，以便当您可以出院时他/她可陪您离开。除非此人在我们的单位，否则您无法办理出院。由於医疗程序後，您的判断能力可能會受到影響，若沒有其他能负责任的成人在旁陪您，我們無法讓您離院去搭公車、搭計程車、或甚至走路回家。

You must have a driver who is 18 years or older present at check in and discharge. If you do not have a driver with you at check in, we will need to reschedule your appointment. This person must remain in the unit during your entire visit so that they are available as soon as you are ready to be discharged. You will not be discharged unless this person is in the unit. Because your judgment may be impaired after this procedure, you will not be released to take public transportation, a taxicab, or even walk home without another responsible adult present to accompany you.

- 整个程序约诊可能需要 3 至 4 个小时来完成。请告知您的司机，他 / 她必须在整个医疗程序中都留在我们的单位。

The entire procedure appointment may take 3 to 4 hours to complete. Please advise your driver that they will need to remain in the facility for the duration of the procedure.

- 如果您患有糖尿病，请向您的医疗保健提供者咨询饮食和药物说明。

If you have diabetes, ask your health care provider for diet and

medicine instructions.

- 如果您需要取消或重新安排预约，请尽快致电内窥镜呼叫中心 734-936-9250 或免费电话 877-758-2626。

If you need to cancel or reschedule your appointment, please call the Endoscopy Call Center as soon as possible at 734-936-9250 or toll-free 877-758-2626.

做此程序的准备需要给我的指示是什么？

What are my instructions for preparing for the procedure?

请仔细遵循以下指示，以确保检查成功。

Follow the instructions included below carefully to ensure a successful exam.

做上消化道镜检查的前 7 天: 7 days before your upper endoscopy:

- 如果您服用阿司匹林或非甾体（非类固醇）抗炎药，如 Advil^â, Motrin^â, Celebrex^â 或布洛芬，您可以继续照常服用。
If you take aspirin or NSAIDs, such as Advil^â, Motrin^â, Celebrex^â, or ibuprofen, you may continue to take them as usual.
- 若您服用抗凝血药，如波立维 (Plavix^â)，泰毕全 (Pradaxa^â)，氯吡格雷 (Clopidogrel^â)，库马丁 (Coumadin^â)，华法林 (Warfarin, Effient^â)，普拉格雷 (Prasugrel^â) 或依诺肝素 (Lovenox^â)，请向您的医护人员询问如何服药。
If you take a blood thinner, such as Plavix^â, Pradaxa^â, Clopidogrel^â, Coumadin^â, warfarin, Effient^â, Prasugrel^â, or Lovenox^â, ask your health care provider for specific instructions.

做上消化道镜检查的前 1 天: 1 day before your upper endoscopy:

- 做程序前 24 小时停止吃所有固体食物。清澈的液体可以饮用。**

Stop eating all solid foods 24 hours before your procedure. Clear liquids are okay to drink.

允许饮用的澄清流质: Clear Liquids – Allowed: <ul style="list-style-type: none">佳得乐 (Gatorade) , Pedialyte 电解质营养冲剂, Powerade 运动饮料 Gatorade, Pedialyte, or Powerade咖啡或茶 (勿加牛奶或奶精) Coffee or tea (no milk or non-dairy creamer)碳酸饮料, 非碳酸饮料 Carbonated and non-carbonated soft drinksKool-Aid 酷爱或其他水果味饮料 Kool-Aid or other fruit-flavored drinks苹果汁、白蔓越莓汁或白葡萄汁 Apple juice, white cranberry juice, or white grape juice果冻 Jell-O (明胶) 或冰棒 Jell-O (gelatin) or popsicles	非澄清流质– 不允许: Non-Clear Liquids – Not Allowed: <ul style="list-style-type: none">鸡汤, 牛肉汤, 菜汤 Chicken, beef, or vegetable broth任何红色或紫色的物品 Red or purple items of any kind酒精 Alcohol牛奶或非乳制奶精 Milk or non-dairy creamers含果肉的果汁 Juice with pulp硬糖果 Hard candy任何不透明的液体 Any liquid you cannot see through
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- 您可以在程序检查前 4 小时像往常一样用 4 盎司水服用所有早晨药物（口服糖尿病药物除外）。

You may take all your morning medicines (except for oral diabetes medicine) as usual with 4 oz. of water up to 4 hours before your procedure.

- 如果您服用口服糖尿病药物 (药片) : 在检查当日的早晨**不要服用此药物**。

If you take oral diabetes medicine (pills), **do not** take the medicine the morning of your test.

- 如果您患有糖尿病，并且您服用口服或注射药物，但不使用泵，请按照我们的**准备医疗程序：不使用胰岛素泵的成人糖尿病患者指南**讲义中的说明进行操作：
<https://michmed.org/RWGky>.

If you have diabetes and you take oral or injectable medicines but do not use a pump, follow the instructions in our **Preparing for a Medical Procedure: Guidelines for Adults with Diabetes not using an Insulin Pump** handout: <https://michmed.org/RWGky>.

- 如果您患有糖尿病并使用胰岛素泵，请按照我们的**准备医疗程序：使用胰岛素泵的成人糖尿病患者指南**讲义中的说明进行操作：

<https://michmed.org/3AQwb>.

If you have diabetes and use an insulin pump, follow the instructions in our **Preparing for a Medical Procedure: Guidelines for Adults with Diabetes Using Insulin Pumps** handout: <https://michmed.org/3AQwb>.

医疗程序前 2 个小时： 2 hours before your procedure:

- 勿咀嚼口香糖。 Stop chewing gum.
- 停止饮用所有澄清液体。 Stop drinking all clear liquids.

随身携带一份您目前所有药物的清单，包括非处方药。

Bring a list of all your current medicines with you, including over-the-counter medicines.

→ 翻页以了解上消化道内窥镜检查的益处、风险和替代方案。

Turn the page to learn about the benefits, risks, and alternatives for an Upper Endoscopy.



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上消化道内镜 (EGD) 有哪些益处、风险和替代方案?

What are the Benefits, Risks, and Alternatives for an Upper Endoscopy (EGD)? (Chinese)

在检查开始之前，我们团队的成员将请您签署一份知情同意书，以表明您了解此项检查、其益处和风险，以及上消化道内窥镜（也称为 EGD 食道胃十二指肠内窥镜）的替代方案。阅读本资料或观看视频：

<http://michmed.org/eaLgY> 以了解知情同意书。

Before starting the procedure, a member of our team will ask you to sign an informed consent indicating that you understand the procedure, its benefits and risks, and the alternatives for an Upper Endoscopy procedure, also called an EGD (Esophago-Gastro-Duodenoscopy). Read this handout or view the video at:
<http://michmed.org/eaLgY> to understand your informed consent.

EGD 的目的是什么？

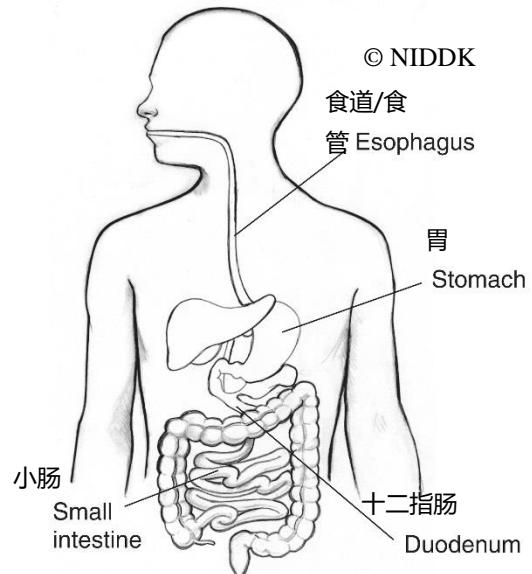
What is the purpose of an EGD?

上消化道内窥镜是一个检查程序，医生运用一个被称为内窥镜的细管通过口腔进入到消化系统的上部亦即上消化道来观察内膜。医生能够运用 EGD 来诊断和治疗许多影响食道、胃和第一部分小肠（也称之为十二指肠）的症状和病症。

Upper GI endoscopy is a procedure in which a doctor passes a thin tube called an endoscope through your mouth to see the lining of the upper part of your digestive system also upper GI tract. EGD enables doctors to diagnose and treat many symptoms and conditions that affect the esophagus, stomach, and the first part of the small intestine also called duodenum.

EGD 有哪些益处？

What is the benefits of an EGD?



医生能够运用 EGD 看到这些内脏的内膜，并可对多种疾病作出诊断，例如：

An EGD enables doctor to see the lining of these internal organs and diagnose many conditions such as:

- 胃食道反（逆）流疾病 (GERD)

Gastroesophageal reflux disease
(GERD)

- 溃疡

Ulcers

- 癌症

Cancer

- 炎症或肿胀

Inflammation, or swelling

- 癌前异常病变，如巴雷特 (Barrett)

食道

Precancerous abnormalities such
as Barrett's esophagus

- 乳糜泻

Celiac disease

- 食道狭窄或变窄

Strictures or narrowing of the
esophagus

- 梗阻

Blockages

医生也可以运用内窥镜送入不同的仪器。这些仪器之一可以获取一小块组织进行检测，这称为活检。对于一些疾病，比如癌症、乳糜泻和胃炎等疾病，需要进行活检来诊断。其他仪器包括用于治疗狭窄的各种类型的扩张器，或用于治疗出血、肿瘤或异常组织的消融装置。

The endoscopy also enables the doctor to pass different instruments. One of these can obtain a small piece of tissue for testing, this is called a biopsy. Biopsies are needed to diagnose conditions such as cancer, celiac disease and gastritis. Other instruments include various types of dilators for treating strictures, or ablation devices for treating bleeding, tumors, or abnormal tissue.

EGD 有哪些风险？

What are the risks of an EGD?

EGD 被认为是一项安全的检查。EGD 并发症的风险较低，但可能包括：

EGD is considered a safe procedure. The risks of complications from an EGD are low, but may include:

- 对镇静药物的反应，包括呼吸或心脏问题。

A reaction to the sedating medication, including breathing or heart problems.

- 出血。100 例患者中出现不到 1 例（小于 1%）

Bleeding. Occurs in less than 1 out of 100 patients (less than 1%)

- 穿孔：肠道撕裂或穿孔。100 例患者中出现不到 1 例（小于 1%）。

Perforation: a tear or a hole in bowel. Occurs in less than 1 in 100 patients (less than 1%).

- 感染。100 例患者中出现不到 1 例（小于 1%）

Infection. Occurs in less than 1 out of 100 patients (less than 1%)

- 误吸：胃内容物可进入肺部，导致肺部感染（肺炎）。100 例患者中出现不到 1 例（小于 1%）

Aspiration: stomach contents may get into the lungs leading to a lung infection (pneumonia). Occurs in less than 1 in 100 patients (less than 1%)

需要用输血或手术来治疗这些情况是很罕见的。

Rarely blood transfusion or surgery are needed to treat these conditions.

服用类固醇或抗凝药物的人，或有某些严重疾病的人的风险比较高。若有做扩张或组织消融，风险也可能更高。

Risks are higher in people taking steroids or anti-coagulation medicines, or in people that have certain serious diseases. Risks may also be higher when dilation or tissue ablation is performed.

有哪些替代方案？

What are the alternatives?

EGD 的唯一替代方案是其他影像学检查，如从体外照射的 X 光或电脑断层 (CT) 扫描。虽然影像学检查有助于识别上消化道中的问题，但它们无法提供与 EGD 同等程度的详细情况，并且无法进行活检或对上述不同情况进行治疗。

The only alternatives to EGD are other imaging tests such as x-rays or CT scans taken from outside the body. While imaging tests can be helpful in identifying problems in the upper GI tract, they are not able to provide the same level of detail as an EGD, and do not allow taking a biopsy or treating different conditions as described above.

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